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1 IN THE UNITED STATES DISTRICT COURT
2 SOUTHERN DISTRICT OF OHIO
3 WESTERN DIVISION
4
5

6 _____)
ERIC L. JEFFRIES,)
7)
Plaintiff,)
8) CASE NO.
vs.) C-1-02-351
9)
CENTRE LIFE INSURANCE CO.,)
10 et al.,)
11 Defendants.)
12 _____)

13
14 Deposition of: MICHAEL F. HARTINGS, Ph.D.
15 Pursuant to: Notice
16 Date and Time: Monday, October 27, 2003
9:55 a.m.
17 Place: Graydon, Head & Ritchey, LLP
18 1900 Fifth Third Center
511 Walnut Street
19 Cincinnati, Ohio 45202
20 Reporter: Patti Stachler, RMR, CRR
21 Notary Public - State of Ohio
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Hartings, Michael, Ph.D.

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1 A. I will say true. But I must explain, again,
2 that the DSM-IV does not contain every possible variety
3 of obsessive compulsive manifestation that there could
4 ever be among human beings and that I selected that
5 diagnosis as the closest approximation to what I viewed
6 as a obsession in Mr. Jeffries and what I viewed as a
7 obsessive ruminative pattern of thinking.

8 Q. Okay. When did this obsessive compulsive
9 disorder like begin?

10 A. I don't know.

11 Q. Aren't personality disorders something that
12 should begin or show themselves in adolescence, at
13 least?

14 A. They do, yes. They can.

15 Q. And what do you know about the exhibition of
16 obsessive compulsive personality disorder in
17 Mr. Jeffries prior to 1997 when he was 36 years old?

18 A. Nothing, because my attempts to obtain that
19 kind of information were blocked.

20 Q. Okay. You say that your attempts to obtain
21 that information were blocked. Is a psychologist -- is
22 it the practice and custom that they obtain that type
23 of information in the clinical interview of someone
24 presenting?

25 A. Yes, that's one source.

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1 A. I asked him such questions at the initial
2 interview and -- I asked him such questions at the
3 initial interview.

4 Q. Okay. Did Mr. Jeffries refuse to answer
5 those in any of the interviews that you conducted?

6 A. No.

7 Q. Okay. So your testimony was that you were
8 blocked. You don't have any information about
9 Mr. Jeffries prior to 1997 that would help you
10 understand whether he's had obsessive compulsive
11 disorder over a long period of time because that
12 information was blocked from you?

13 A. Right.

14 Q. That doesn't -- that's not suggested by the
15 notes that you took?

16 A. Mr. Jeffries suffers from what we
17 psychologists call denial. And one would not expect to
18 induce such information from Mr. Jeffries, which is why
19 I asked to interview his wife.

20 Q. So you chose to simply not ask Mr. Jeffries
21 those questions at all?

22 A. No, I asked him.

23 Q. Well, both -- do you know who Dr. Shear is?
24 Have you seen her report?

25 A. Yes.

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1 I turn to page 46 of the DSM-IV and there I have
2 300.81.

3 A. Right.

4 Q. Did I do something wrong?

5 A. Yes.

6 Q. Okay. What did I do wrong?

7 A. If I can have a minute, I'll show you. The
8 300.81 that I used for the diagnosis is right there.

9 Q. You used -- you're handing me another page
10 from your materials that I've not been provided
11 earlier. I need to make a copy of that file, too,
12 since we've pulled out a couple things that don't exist
13 in the file that was given to me previously.

14 A. And the reason for that is that, as I said
15 before, I continue to work on the file and things get
16 added.

17 Q. Okay.

18 A. If you want a copy, you're most welcome.

19 Q. That would be wonderful.

20 You pulled this out and you highlighted this.
21 What's the highlighting for on -- let's mark this.

22 A. It's to highlight the basis upon which I made
23 the diagnosis of 300.81.

24 Q. Okay. This is going to be Exhibit 83.

25 MR. ROBERTS: Mr. Ellis, could I please have

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1 my book back?

2 MR. ELLIS: You bet.

3 MR. ROBERTS: Great guy.

4 MR. ELLIS: I know.

5 Q. Okay. Now, my Exhibit 80 is copies of page
6 446, 447, 448, 449 and 450 of the DSM-IV?

7 A. Right.

8 Q. And we've marked as Exhibit 83 page 451 and
9 452 of the same book?

10 A. Apparently not.

11 Q. Well, mine goes 446 to 450. And it goes
12 300.81 to 300.82. Yours picks up at 451 and goes to
13 452. So it's not the same book?

14 A. Apparently not. I think this might help
15 clarify --

16 Q. Okay.

17 A. -- the discrepancy. If you look here,
18 300.82, undifferentiated somatoform disorder.
19 Apparently in some edition of the DSM-III, the powers
20 that be increased this digit by one, but it's the same
21 diagnosis.

22 Q. DSM-III?

23 A. Or IV, excuse me.

24 Q. You didn't clarify things for me. Your 301.4
25 here -- excuse me, your 300.81, your axis I diagnosis

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1 on March 15 of 2003, that's not a 300.81 that's Exhibit
2 80?

3 A. No.

4 Q. You're talking about something else?

5 A. I'm talking about 300.81 that is in this
6 book, which apparently is listed in your book as
7 300.82.

8 Q. You have a -- you are basing your report on a
9 version of the DSM that predates the one that I've been
10 using?

11 A. That I have in my office, yes.

12 Q. A prior edition to the one that I shared with
13 you?

14 A. It's a DSM-IV. I don't know.

15 MR. ELLIS: It may be subsequent, Mike. I
16 don't know whether it's DSM-IVR or what. There
17 are multiple versions of that book.

18 A. Yes.

19 Q. You say in your report that it's somatization
20 disorder, which is what my Exhibit 80 calls 300.81?

21 A. Right.

22 Q. You're saying your report should really say
23 300.82, undifferentiated somatoform disorder?

24 A. Well, yes.

25 Q. It's a different diagnosis to a different

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1 number?

2 A. No, it's the same number. It's the same
3 number in my book. It's a different kind of
4 somatization disorder, and this is the one that
5 Mr. Jeffries --

6 Q. But you don't say --

7 A. No, I didn't say it in there.

8 Q. You don't say undifferentiated somatoform
9 disorder in your report?

10 A. I don't, no.

11 Q. You use the exact same terminology that
12 corresponds with 300.81 in my book?

13 A. Okay. That's true.

14 Q. Have you changed your diagnosis since March
15 2003?

16 A. Not at all.

17 Q. So I just throw my Exhibit 80, 300.81, out?
18 It doesn't mean anything in Mr. Jeffries' case?

19 A. 300.82 is the one that means something in
20 Mr. Jeffries' case.

21 MR. ELLIS: In your book.

22 A. In your book.

23 Q. Okay. May I look at your --

24 A. Sure.

25 Q. Have you reviewed Dr. Shear's report prior to

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1 today?

2 A. Several times.

3 Q. Okay. Have you spoken to Mr. Ellis about her
4 report?

5 A. Once.

6 Q. Okay. Did you ever give him your written
7 impressions of her report?

8 A. Yes.

9 Q. You know that she commented that your
10 diagnosis of 300.81 is -- just can't be because
11 Mr. Jeffries doesn't have any sexual symptoms, right?
12 You're mindful of that criticism?

13 A. I know that's what she says, based upon her
14 assumption of a DSM description that I didn't use.
15 That's the one that describes Mr. Jeffries.

16 Q. Okay. She assumed that when you say he
17 suffers from 300.81, as a psychologist you're up on the
18 new versions of DSM-IV, and so when you write a report
19 in March 2003 saying that a person has 300.81, another
20 psychologist should reasonably rely on that to mean
21 300.81, the most recent version, right?

22 MR. ELLIS: Objection.

23 A. I can't be accountable for what she relies on
24 or doesn't rely on.

25 Q. Well, she was more up to speed than you were,

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1 sir?

2 A. That may be. She may have the latest,
3 hottest, off-the-press version of DSM-IV TRR
4 whatever.

5 Q. So she was mistaken, then, to take your
6 report and read it for what it says and that is that
7 you were diagnosing 300.81 when really you were
8 diagnosing 300.82?

9 MR. ELLIS: Objection to form.

10 Q. Is that right?

11 A. I was diagnosing out of the manual I have in
12 my office, 300.81 somatoform disorder, as described
13 there and as fits Mr. Jeffries like a glove.

14 Q. Okay. What's the age of onset for this
15 glove-fitting new diagnosis that you have?

16 A. Can be any time.

17 MR. ELLIS: Objection to form, new. Not what
18 he testified.

19 MR. ROBERTS: Well, it's new to me as of
20 about five minutes ago.

21 A. It specifically does not have to occur before
22 the age of 30.

23 Q. That's convenient.

24 A. It's true, too.

25 MR. ELLIS: Objection to counsel's comments

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